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PTO/SB/01 (12-97)

Approved for rough 9/30/00.OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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|  |                              |                                |
|--|------------------------------|--------------------------------|
| <b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b><br><b>(37 CFR 1.63)</b><br><br><input checked="" type="checkbox"/> Declaration Submitted with Initial Filing      OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required) | Attorney Docket Number       | TM00-004.US                    |
|  | First Named Inventor         | KUNINS, Jeff, et. al.          |
|  | COMPLETE IF KNOWN            |                                |
|  | Application Number           | Not Yet Assigned 09/592,241 ug |
|  | Filing Date                  | Herewith                       |
|  | Group Art Unit               | Not Yet Assigned 2124 ug       |
| Examiner Name  | Not Yet Assigned RUBIOTTI ug |                                |

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND APPARATUS FOR  
ZERO-FOOTPRINT PHONE APPLICATION DEVELOPMENT**

(Title of the Invention)

the specification of which  
☒ is attached hereto  
OR

☐ was filed on (MM/DD/YYYY) [ ] as United States Application Number or PCT International Application Number [ ] and was amended on (MM/DD/YYYY) [ ] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed     | Certified Copy Attached? |                          |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|--------------------------|
|                                     |         |                                  |                          | YES                      | NO                       |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto. |
|-----------------------|--------------------------|--|
|                       |                          |  |

(Page 1 of 2)

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

| U.S. Parent Application or PCT Parent Number | Parent Filing Date<br>(MM/DD/YYYY) | Parent Patent Number<br>(if applicable) |
|--|------------------------------------|---|
|  |                                    |   |

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 24488

OR

☐ Registered practitioner(s) name/registration number listed below

| Name | Registration Number | Name | Registration Number |
|------|---------------------|------|---------------------|
|      |                     |      |                     |

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label



24488

OR ☐ Correspondence address below

|         |                       |           |              |     |              |
|---------|-----------------------|-----------|--------------|-----|--------------|
| Name    | Erik L. Oliver        |           |              |     |              |
| Address | Tellme Networks, Inc. |           |              |     |              |
| Address | 1310 Villa Street     |           |              |     |              |
| City    | Palo Alto             | State     | CA           | ZIP | 94041        |
| Country | U.S.                  | Telephone | 650-930-9000 | Fax | 650-930-9101 |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

| Given Name (first and middle (if any)) |                  |       |    | Family Name or Surname |       |             |     |
|--|------------------|-------|----|------------------------|-------|-------------|-----|
| Jeff C.                                |                  |       |    | Kunins                 |       |             |     |
| Inventor's Signature                   |                  |       |    |                        |       | Date        |     |
| Residence: City                        | San Francisco    | State | CA | Country                | USA   | Citizenship | USA |
| Post Office Address                    | 23 Roscoe Street |       |    |                        |       |             |     |
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| City                                   | San Francisco    | State | CA | ZIP                    | 94110 | Country     | USA |

☒ Additional inventors are being named on the 4 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto:

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## DECLARATION

**ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
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|   |               |                             |    |   |       |                    |     |
|---|---------------|-----------------------------|----|---|-------|--------------------|-----|
| <b>Name of Additional Joint Inventor, if any:</b> |               |                             |    | <input type="checkbox"/> A petition has been filed for this unsigned inventor |       |                    |     |
| <b>Given Name (first and middle (if any))</b>     |               |                             |    | <b>Family Name or Surname</b>   |       |                    |     |
| Hadi  |               |                             |    | Partovi   |       |                    |     |
| <b>Inventor's Signature</b>                       |               |                             |    | <b>Date</b>   |       |                    |     |
| <b>Residence: City</b>                            | San Francisco | <b>State</b>                | CA | <b>Country</b>  | USA   | <b>Citizenship</b> | USA |
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| <b>Post Office Address</b>                        |               |                             |    |   |       |                    |     |
| <b>City</b>                                       | San Francisco | <b>State</b>                | CA | <b>ZIP</b>  | 94123 | <b>Country</b>     | USA |
| <b>Name of Additional Joint Inventor, if any:</b> |               |                             |    | <input type="checkbox"/> A petition has been filed for this unsigned inventor |       |                    |     |
| <b>Given Name (first and middle (if any))</b>     |               |                             |    | <b>Family Name or Surname</b>   |       |                    |     |
| Brandon William                                   |               |                             |    | Porter  |       |                    |     |
| <b>Inventor's Signature</b>                       |               |                             |    | <b>Date</b>   |       |                    |     |
| <b>City</b>                                       | Mountain View | <b>State</b>                | CA | <b>Country</b>  | USA   | <b>Citizenship</b> | USA |
| <b>Post Office Address</b>                        |               | 840 E. Dana Str             |    |   |       |                    |     |
| <b>Post Office Address</b>                        |               |                             |    |   |       |                    |     |
| <b>City</b>                                       | Mountain View | <b>State</b>                | CA | <b>ZIP</b>  | 94041 | <b>Country</b>     | USA |
| <b>Name of Additional Joint Inventor, if any:</b> |               |                             |    | <input type="checkbox"/> A petition has been filed for this unsigned inventor |       |                    |     |
| <b>Given Name (first and middle (if any))</b>     |               |                             |    | <b>Family Name or Surname</b>   |       |                    |     |
| Matthew Talin                                     |               |                             |    | Marx  |       |                    |     |
| <b>Inventor's Signature</b>                       |               |                             |    | <b>Date</b>   |       |                    |     |
| <b>City</b>                                       | Mountain View | <b>State</b>                | CA | <b>Country</b>  | USA   | <b>Citizenship</b> | USA |
| <b>Post Office Address</b>                        |               | 100 No. Whisman Road, #3617 |    |   |       |                    |     |
| <b>Post Office Address</b>                        |               |                             |    |   |       |                    |     |
| <b>City</b>                                       | Mountain View | <b>State</b>                | CA | <b>ZIP</b>  | 94043 | <b>Country</b>     | USA |

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## DECLARATION

### ADDITIONAL INVENTOR(S)

Supplemental Sheet

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|   |               |                            |    |   |       |                    |         |
|---|---------------|----------------------------|----|---|-------|--------------------|---------|
| <b>Name of Additional Joint Inventor, if any:</b> |               |                            |    | <input type="checkbox"/> A petition has been filed for this unsigned inventor |       |                    |         |
| <b>Given Name (first and middle (if any))</b>     |               |                            |    | <b>Family Name or Surname</b>   |       |                    |         |
| Angus Macdonald                                   |               |                            |    | Davis   |       |                    |         |
| <b>Inventor's Signature</b>                       |               |                            |    | <b>Date</b>   |       |                    |         |
| <b>Residence: City</b>                            | Sunnyvale     | <b>State</b>               | CA | <b>Country</b>  | USA   | <b>Citizenship</b> | USA     |
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| <b>Post Office Address</b>                        |               |                            |    |   |       |                    |         |
| <b>City</b>                                       | Sunnyvale     | <b>State</b>               | CA | <b>ZIP</b>  | 94087 | <b>Country</b>     | USA     |
| <b>Name of Additional Joint Inventor, if any:</b> |               |                            |    | <input type="checkbox"/> A petition has been filed for this unsigned inventor |       |                    |         |
| <b>Given Name (first and middle (if any))</b>     |               |                            |    | <b>Family Name or Surname</b>   |       |                    |         |
| Patrick   |               |                            |    | McCormick   |       |                    |         |
| <b>Inventor's Signature</b>                       |               |                            |    | <b>Date</b>   |       |                    |         |
| <b>City</b>                                       | Sunnyvale     | <b>State</b>               | CA | <b>Country</b>  | USA   | <b>Citizenship</b> | USA     |
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| <b>Post Office Address</b>                        |               |                            |    |   |       |                    |         |
| <b>City</b>                                       | Sunnyvale     | <b>State</b>               | CA | <b>ZIP</b>  | 94089 | <b>Country</b>     | USA     |
| <b>Name of Additional Joint Inventor, if any:</b> |               |                            |    | <input type="checkbox"/> A petition has been filed for this unsigned inventor |       |                    |         |
| <b>Given Name (first and middle (if any))</b>     |               |                            |    | <b>Family Name or Surname</b>   |       |                    |         |
| John  |               |                            |    | Giannandrea   |       |                    |         |
| <b>Inventor's Signature</b>                       |               |                            |    | <b>Date</b>   |       |                    |         |
| <b>City</b>                                       | Mountain View | <b>State</b>               | CA | <b>Country</b>  | USA   | <b>Citizenship</b> | Britain |
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| <b>Post Office Address</b>                        |               |                            |    |   |       |                    |         |
| <b>City</b>                                       | Mountain View | <b>State</b>               | CA | <b>ZIP</b>  | 94041 | <b>Country</b>     | USA     |

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| <b>DECLARATION</b> | <b>ADDITIONAL INVENTOR(S)</b><br>Supplemental Sheet<br>Page <u>3</u> of <u>4</u> |
|--------------------|--|

|   |  |                         |       |   |         |       |             |
|---|--|-------------------------|-------|---|---------|-------|-------------|
| <b>Name of Additional Joint Inventor, if any:</b> |  |                         |       | <input type="checkbox"/> A petition has been filed for this unsigned inventor |         |       |             |
| Given Name (first and middle (if any))            |  |                         |       | Family Name or Surname  |         |       |             |
| Andrew  |  |                         |       | Clarke  |         |       |             |
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| City  |  | San Francisco           | State | CA  | ZIP     | 94121 | Country     |
| <b>Name of Additional Joint Inventor, if any:</b> |  |                         |       | <input type="checkbox"/> A petition has been filed for this unsigned inventor |         |       |             |
| Given Name (first and middle (if any))            |  |                         |       | Family Name or Surname  |         |       |             |
| Tom   |  |                         |       | Thai  |         |       |             |
| Inventor's Signature                              |  |                         |       |   | Date    |       |             |
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| Post Office Address                               |  |                         |       |   |         |       |             |
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| City  |  | Palo Alto               | State | CA  | ZIP     | 94306 | Country     |
| <b>Name of Additional Joint Inventor, if any:</b> |  |                         |       | <input type="checkbox"/> A petition has been filed for this unsigned inventor |         |       |             |
| Given Name (first and middle (if any))            |  |                         |       | Family Name or Surname  |         |       |             |
| Eckart  |  |                         |       | Walther   |         |       |             |
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| Post Office Address                               |  |                         |       |   |         |       |             |
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| City  |  | Palo Alto               | State | CA  | ZIP     | 94301 | Country     |

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|   |               |                    |    |   |       |                    |     |
|---|---------------|--------------------|----|---|-------|--------------------|-----|
| <b>Name of Additional Joint Inventor, if any:</b> |               |                    |    | <input type="checkbox"/> A petition has been filed for this unsigned inventor |       |                    |     |
| <b>Given Name (first and middle (if any))</b>     |               |                    |    | <b>Family Name or Surname</b>   |       |                    |     |
| Daniel Joseph                                     |               |                    |    | Howard  |       |                    |     |
| <b>Inventor's Signature</b>                       |               |                    |    | <b>Date</b>   |       |                    |     |
| <b>Residence: City</b>                            | Mountain View | <b>State</b>       | CA | <b>Country</b>  | USA   | <b>Citizenship</b> | USA |
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| <b>Post Office Address</b>                        |               |                    |    |   |       |                    |     |
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| <b>Name of Additional Joint Inventor, if any:</b> |               |                    |    | <input type="checkbox"/> A petition has been filed for this unsigned inventor |       |                    |     |
| <b>Given Name (first and middle (if any))</b>     |               |                    |    | <b>Family Name or Surname</b>   |       |                    |     |
| James Robert                                      |               |                    |    | Everingham  |       |                    |     |
| <b>Inventor's Signature</b>                       |               |                    |    | <b>Date</b>   |       |                    |     |
| <b>City</b>                                       | Santa Cruz    | <b>State</b>       | CA | <b>Country</b>  | USA   | <b>Citizenship</b> | USA |
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| <b>Post Office Address</b>                        |               |                    |    |   |       |                    |     |
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| <b>Name of Additional Joint Inventor, if any:</b> |               |                    |    | <input type="checkbox"/> A petition has been filed for this unsigned inventor |       |                    |     |
| <b>Given Name (first and middle (if any))</b>     |               |                    |    | <b>Family Name or Surname</b>   |       |                    |     |
|   |               |                    |    |   |       |                    |     |
| <b>Inventor's Signature</b>                       |               |                    |    | <b>Date</b>   |       |                    |     |
| <b>City</b>                                       |               | <b>State</b>       |    | <b>Country</b>  |       | <b>Citizenship</b> |     |
| <b>Post Office Address</b>                        |               |                    |    |   |       |                    |     |
| <b>Post Office Address</b>                        |               |                    |    |   |       |                    |     |
| <b>City</b>                                       |               | <b>State</b>       |    | <b>ZIP</b>  |       | <b>Country</b>     |     |

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